



New Tool Makes Smart Health Plan Choices Easier for Pennsylvanians

Comparison Tool to Help Consumers Choose Plans—On- and Off-Exchange—That Will Save Them Thousands of Dollars and Give Them Access to Doctors They Want

HARRISBURG, Pa.—The Affordable Care Act states that the health insurance marketplaces (Exchanges) will “assist consumers in making easy health insurance choices.” Through a partnership with the Pennsylvania Insurance Department, Pennsylvanians now have a plan-comparison tool built to achieve that goal at pa.checkbookhealth.org. The tool compares not only plans on the public Exchanges but also plans that are not on the Exchanges.

The tool is developed and hosted by Consumers’ Checkbook, a nonprofit organization with 40 years of experience helping consumers choose health plans, doctors, hospitals, and other providers. Checkbook has also created similar tools in Illinois, Missouri, Minnesota, Vermont, and Washington, D.C.

The pa.checkbookhealth.org plan comparison tool shows the consumer immediately what the consumer needs to make a good plan choice:

- A single dollar-amount actuarial estimate of average total cost in each plan (premium, after any available government subsidy, plus out-of-pocket costs) for someone with the same family size, ages, health status, and other characteristics as the user;
- Risk in the plan—the cost in each plan if the user’s health care usage in a year turns out to be very high and the chances of having such a year;
- An overall measure of the quality of care and service in each plan, giving the user the opportunity to personalize the weights given to various dimensions of quality, ranging from ease of getting doctor appointments to speed and simplicity of claims payment to quality of care for diabetes patients;
- If the consumer types in names of desired doctors, which of those doctors are in each plan, and also a measure of how many doctors are in each plan’s network near the consumer so the consumer will have an indication of how easy it will be to find good doctors.
- If the consumer is prescribed any medications, these can be entered to check if their prescriptions are covered by the plan.
- Information on plans that are on the Exchange (the Federally Facilitated Marketplace) and plans that are not on the Exchange but in some cases offer better premiums, benefits, or other features than on-Exchange plans.
- A display that lets the user see multiple plans on the same webpage, rather than forcing the user to go from page to page to see available plans, while remembering the key facts on each plan.

This combination of features is not available anywhere else. Most consumers can make a good plan choice using this tool within about five minutes, although consumers who want to take the time can drill down for extensive detail on each plan.

“Shopping for health insurance and keeping track of what each plan offers can be confusing and, at times, overwhelming,” said Commissioner Miller. “Using this plan comparison tool helps consumers get a holistic view of the details of plans and how their differences may impact costs and access to care.”

There is still time for consumers to enroll in plans during the open enrollment period that ends January 31, 2017. And it’s important that consumers have the help that a good plan comparison tool provides. Studies show that consumers “dread” shopping for insurance, for good reason. Even insurance experts can’t figure out “is a plan with a \$200 deductible and \$10,000 out-of-pocket limit better for me than a plan with a \$2,000 deductible and \$4,000 out-of-pocket limit, and how about differences in copayments, coinsurance, doctor availability, etc.?”

Without a good plan comparison tool, consumers tend to use shortcuts like looking for a plan with the lowest premium, the lowest deductible, a brand-name they recognize, or a specific in-network doctor. And they often end up spending thousands more than they should, getting poor customer service, not having the doctors that would be best when they need them, or coming up short in other ways.

For example, a specific family in Pittsburgh shopping based on premium alone and choosing the lowest-premium plan would probably end up spending about \$5,000 more in the coming year than it would spend if it chose a plan with a higher premium but lower projected out-of-pocket costs.

A novel feature in the plan comparison tool now available to Pennsylvania consumers is that it compares side-by-side plans that are available on the Affordable Care Act Exchange (the Federally Facilitated Marketplace) and also plans that are not on that marketplace. There has been substantial publicity about some insurance carriers pulling some or all of their plans off the Exchanges. And for some consumers there will be substantial savings from selecting off-Exchange plans. For example, a 44 year-old husband and wife in Harrisburg in good health with a \$65,000 income can expect to have annual costs about \$2,000 lower with an Aetna off-Exchange plan or a Keystone off-Exchange plan than with the lowest cost on-Exchange plan.

But for many consumers, the on-Exchange plans will be lowest cost. In some parts of Pennsylvania, there are few if any off-Exchange plans. And most Pennsylvania consumers now buying insurance on the Federally Facilitated Marketplace have low enough income to qualify for financial help paying for premiums and/or for better deductibles or other benefits. This financial help is only available for on-Exchange plans, so those consumers will almost all be better off with on-Exchange plans.

A tool like the one Checkbook has developed in partnership with the Pennsylvania Insurance Department, with on- and off-Exchange plans, illustrates a model that could exist, enabling consumers to compare all plans available in a market, even if the Affordable Care Act Exchanges were to disappear.

About Checkbook: *Consumers’ Checkbook/Center for the Study of Services (see www.Checkbook.org) is a nonprofit organization whose mission is to inform and educate consumers about the quality and cost of service providers and how to select and deal with such providers. Checkbook publishes magazines and books and has websites to make its ratings and reports on service providers widely available to consumers. For example, at Checkbook.org, consumers will find ratings of individual surgeons and of hospitals throughout the U.S. based on how their patients fare in terms of death rates and complication rates. For 37 years, Checkbook has produced its Guide to Health Plans for Federal Employees and Retirees, subscribed to by individual consumers and by many federal agencies (HSS, Dept. of Labor, Federal Reserve, Social Security Administration, and many others) to help their employees make good plan choices. Among other honors, Checkbook in 2015 received the National Quality Forum’s first-ever Consumers and Patients Quality Award.*